

## **Application Data Sheet**

### **Application Information**

Application number::

Filing Date::

Application Type::

Regular

Subject Matter::

Utility

Suggested classification::

Suggested Group Art Unit::

CD-ROM or CD-R?::

None

Number of CD disks::

Number of copies of CDs::

Sequence submission?::

Computer Readable Form (CRF)?::

Number of copies of CRF::

Title::

ANIMAL FEED, METHOD FOR PREPARING  
ANIMAL FEED, AND METHOD FOR FEEDING  
AN ANIMAL

Attorney Docket Number::

006401.00439

Request for Early Publication?::

NO

Request for Non-Publication?::

NO

Suggested Drawing Figure::

Total Drawing Sheets::

Small Entity?::

NO

Latin name::

Variety denomination name::

Petition included?::

NO

Petition Type::

Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?: NO

### **Applicant Information**

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name:: Daniel  
Middle Name:: R.  
Family Name:: Freeman  
Name Suffix::  
City of Residence:: Muscatine  
State or Province of Residence:: Iowa  
Country of Residence:: USA  
Street of mailing address:: 517 Roscoe Avenue  
City of mailing address:: Muscatine  
State or Province of mailing address:: Iowa  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 52761

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name::  
Middle Name::  
Family Name::  
Name Suffix::  
City of Residence::  
State or Province of Residence:: I  
Country of Residence::  
Street of mailing address::

City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::

Applicant Authority Type:: Inventor  
Primary Citizenship Country::  
Status:: Full Capacity  
Given Name::  
Middle Name::  
Family Name::  
Name Suffix::  
City of Residence::  
State or Province of Residence::  
Country of Residence::  
Street of mailing address::  
City of mailing address::  
State or Province of mailing address::  
Country of mailing address::  
Postal or Zip Code of mailing address::

### **Correspondence Information**

Correspondence Customer Number:: 22908

### **Representative Information**

Representative Customer Number:: 22908

### Domestic Priority Information

Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	Continuation of	09/901,342	07/09/01
	Continuation of		
	Non-Provisional of		

### Foreign Priority Information

Country::	Application number::	Filing Date::	Priority Claimed::

### Assignee Information

Assignee name:: Grain Processing Corporation  
Street of mailing address:: 1600 Oregon Street  
City of mailing address:: Muscatine  
State or Province of mailing address:: Iowa  
Country of mailing address:: USA  
Postal or Zip Code of mailing address:: 52761-1494